

**PARENT NOTICE OF EVALUATION REQUEST
PARENT PERMISSION FOR SPECIAL EDUCATION EVALUATION**

Student Name _____ School _____ Date of Conference _____

A referral for an educational evaluation to determine the possible existence, nature and extent of a disability, if any, and the special education services the student may need has been initiated.

The procedures that may be used in this evaluation include:

(1) Assessment Areas	(2) Evaluation Techniques	(3) Possible Evaluation/ Consultation Team Members
achievement communication skills intelligence motor abilities physical condition social/emotional behavior vocational Other: _____	classroom observation group tests individual tests interview review of records Other: _____	school nurse school psychologist school specialists speech/language pathologist teacher(s) Other: _____

Initial Evaluation: The findings of the evaluation will be used by a Case Conference Committee, of which you will be a member, to develop educational program recommendations for your child. You will be notified of the date, time, and place of this meeting, which will occur no more than fifty (50) school days from the date on which you sign and return the "Parent Permission for Special Education Evaluation" form or within twenty (20) school days if your student has participated in research-based interventions.

- 50 school days
- 20 school days

A copy, with full explanation, of the Referral for Evaluation and the Notice of Procedural Safeguards/Parent Rights have been given to you.

Choose One:

- I would like a copy of the Multi-disciplinary team report at the school 5 days prior to the case conference meeting.
 - I would like a copy of the Multi-disciplinary team report and a meeting to explain the M-team evaluation 5 days prior to the case conference meeting.
 - I will receive a copy of the Multi-disciplinary team report at the case conference committee meeting.
- Note: If no selection is made a copy of the evaluation report will be reviewed at the case conference committee meeting*

Re-evaluation: A review of the existing evaluation data and information has been conducted. A re-evaluation is needed to determine one of the following (please check as appropriate):

- Confirm eligibility for special education and related services.
- Determine that the student is eligible for special education and related services under a different or additional category.
- Determine that the student is no longer eligible for special education and related services.
- Inform the student's case conference committee of the student's special education and related service needs.

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The scope of this evaluation will be determined by the following questions. The specific questions to be addressed by this additional evaluation are as follows:

Permission is given to conduct the evaluation as described.

Permission is denied.

Parent/Guardian/Surrogate Signature

Date

Administrator/Designee Signature

Date